

=> perinuclear antineutrophil cytoplasmic autoantibody  
L1 0 FILE 1MOBILITY  
L2 0 FILE AGRICOLA  
L3 0 FILE AQUASCI  
L4 1 FILE BIOTECHNO  
L5 0 FILE COMPENDEX  
L6 0 FILE COMPUAB  
L7 0 FILE CONFSCI  
L8 0 FILE ELCOM  
L9 0 FILE HEALSAFE  
L10 0 FILE INSPEC  
L11 0 FILE LIFESCI  
L12 0 FILE OCEAN  
L13 9 FILE PASCAL  
L14 0 FILE POLLUAB  
L15 0 FILE SOLIDSTATE

TOTAL FOR ALL FILES

L16 10 PERINUCLEAR ANTINEUTROPHIL CYTOPLASMIC AUTOANTIBODY

=> l16 and (fecal or stool or feces)  
L17 0 FILE 1MOBILITY  
L18 0 FILE AGRICOLA  
L19 0 FILE AQUASCI  
L20 0 FILE BIOTECHNO  
L21 0 FILE COMPENDEX  
L22 0 FILE COMPUAB  
L23 0 FILE CONFSCI  
L24 0 FILE ELCOM  
L25 0 FILE HEALSAFE  
L26 0 FILE INSPEC  
L27 0 FILE LIFESCI  
L28 0 FILE OCEAN  
L29 0 FILE PASCAL  
L30 0 FILE POLLUAB  
L31 0 FILE SOLIDSTATE

TOTAL FOR ALL FILES

L32 0 L16 AND (FECAL OR STOOL OR FECES)

=> anti-neutrophil cytoplasmic antibodies  
L33 0 FILE 1MOBILITY  
L34 10 FILE AGRICOLA  
L35 0 FILE AQUASCI  
L36 149 FILE BIOTECHNO  
L37 3 FILE COMPENDEX  
L38 0 FILE COMPUAB  
L39 16 FILE CONFSCI  
L40 0 FILE ELCOM  
L41 0 FILE HEALSAFE  
L42 2 FILE INSPEC  
L43 123 FILE LIFESCI  
L44 0 FILE OCEAN  
L45 239 FILE PASCAL  
L46 0 FILE POLLUAB  
L47 0 FILE SOLIDSTATE

TOTAL FOR ALL FILES

L48 542 ANTI-NEUTROPHIL CYTOPLASMIC ANTIBODIES

=> 148 and (fecal or stool or feces)

L49 0 FILE 1MOBILITY  
L50 0 FILE AGRICOLA  
L51 0 FILE AQUASCI  
L52 0 FILE BIOTECHNO  
L53 0 FILE COMPENDEX  
L54 0 FILE COMPUAB  
L55 0 FILE CONFSCI  
L56 0 FILE ELCOM  
L57 0 FILE HEALSAFE  
L58 0 FILE INSPEC  
L59 0 FILE LIFESCI  
L60 0 FILE OCEAN  
L61 1 FILE PASCAL  
L62 0 FILE POLLUAB  
L63 0 FILE SOLIDSTATE

TOTAL FOR ALL FILES

L64 1 L48 AND (FECAL OR STOOL OR FECES)

=> d 164 ibib abs total

L64 ANSWER 1 OF 1 PASCAL COPYRIGHT 2010 INIST-CNRS. ALL RIGHTS RESERVED. on  
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AB Perinuclear anti-neutrophil cytoplasmic  
antibodies (P-ANCA) of the IgG class have been reported in  
inflammatory bowel disease, mainly in ulcerative colitis. Since this  
disease affects the gastrointestinal tract, we determined whether IgA  
class ANCA were present in inflammatory bowel disease. We used an  
indirect immunofluorescence assay for IgG and IgA ANCA testing. Sera from  
34 patients with Crohn's disease and 29 patients with ulcerative colitis  
were collected together with clinical and laboratory data. We found IgA  
class ANCA of a perinuclear type in 52% of patients with ulcerative  
colitis and in 9% of Crohn's disease patients. There was a significant  
association between the presence of IgA ANCA and the occurrence of blood  
in the feces in the ulcerative colitis group ( $P = 0.03$ ). IgG  
ANCA was found in 56% of patients with ulcerative colitis and in 7% of  
patients with Crohn's disease. Because of partial overlap between IgG and  
IgA ANCA positivity, the sensitivity of ANCA testing in ulcerative  
colitis increased from 56% up to 78% by combining IgG and IgA assays. In  
conclusion, IgA ANCA occurs with a high prevalence in ulcerative colitis.  
Moreover there is a possible relationship between IgA ANCA and disease

activity in ulcerative colitis.